PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No.		0156-2004US01				
First Inventor		Michael Lebner				
Title DEVICE FOR LACERATION OR INCISION CLOSUR						
		51,000,000,000,001,00				

(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	E	xpress	Mail Label N	o. EL	.909893	058US	<u> </u>	/
APPLICATION ELEMENTS			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application						
See MPEP chapter 600 concerning utility patent application contents.						hington,			
	orm (e.g., PTO/SB/17) duplicate for fee processing)		7.	CD-ROM or C				e table or	70
2. Applicant claims s See 37 CFR 1.27.			Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
3. Specification (preferred arrangement)	[Total Pages 21]		a. Computer Readable Form (CRF)						
- Descriptive title	of the invention		b. Specification Sequence Listing on:						
 Statement Regard 	e to Related Applications arding Fed sponsored R & D		i. CD-ROM or CD-R (2 copies); or						
	quence listing, a table, rogram listing appendix		ii. paper						
- Background of - Brief Summary	the Invention		c. Statements verifying identity of above copies						
	n of the Drawings (<i>if filed</i>)		9.	ACCOMPAN' Assignment					
- Claim(s)	•		1 " }	37 CFR 3.7	•	•		Power of	
- Abstract of the	[3]		10. L	(when there				⊢ Attorne	′
4. Drawing(s) (35 U		1	111.	English Tra			ent (<i>ii</i> r a	<i>ippiicabie)</i> □ Copies d	f IDS
5. Oath or Declaration	[Total Pages 2)	12. L	Statement			_	☐ Citations	•
Copy from a	uted (original or copy) prior application (37 CFR 1.63 (d))		13. Preliminary Amendment Return Receipt Postcard (MPEP 503)						
	tion/divisional with Box 18 completed)		(Should be specifically itemized)						
Signed sta	ION OF INVENTOR(S) tement attached deleting inventor(s)		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
	he prior application, see 37 CFR and 1.33(b).		16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35						
6. Application Data	Sheet. See 37 CFR 1.76		or its equivalent.						
		unnly	the requisite information below and in a preliminary amendment,						
or in an Application Data She		ирріу	uie iequ	แรกซ แบบกาลแบก	Delow 6	anu in a p	JI G IIIIIIII	nary amend	miem,
Continuation	Divisional Continuation-in-part (Cl	IP)	of prior application No.:/ Group Art Unit:						
	Examiner:ONAL APPS only: The entire disclosure of			ication, from which	h an oa	th or dec			
	Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
19. CORRESPONDENCE ADDRESS									
Customer Number or Bar Code Label (Insert@ustomer No. or Altach bar code label here) or Correspondence address below									
Name	Kevin M. Farrell, Pierce A	Atwo	od						
	One New Hampshire Avenue								
Address	Suite 350								
City Portsmouth St		ate NH Zip Code 03801							
Country	USA Tele		phone (603) 433-6300 Fax (603) 433-			-6372			
Name (Print/Type)	Name (Print/Type) Kevin M. Farrell			Registration No. (Attorney/Agent) 35,505					
Signature	Witheres					Date	7124	103	

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PTO/SB/17 (05-03)
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FEE TRANSMITTAL for FY 2003

(\$) 501

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Application Number		
Filing Date		
First Named Inventor	Michael Lebner	
Examiner Name		
Art Unit		
Attorney Docket No.	0156-2004US01	

Complete if Known

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:		Large Entity Small Entity				
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number	1051	130	2051		Surcharge - late filing fee or oath	T CC T GIO
Deposit -Account Name	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	
1001 750 2001 375 Utility filing fee \$375	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 375	1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,300	2453	650	Petition to revive - unintentional	
Fee from	1501		2501		Utility issue fee (or reissue)	
Extra Claims below Fee Paid Total Claims 34 -20** = 14 X \$18 - \$252	1502	470	2502		Design issue fee	
Independent 2 24 0	1503	630	2503		Plant issue fee	
Claims 2 - 3 = 2 A 304 = 0 Multiple Dependent =	1460	130	1460		Petitions to the Commissioner	
Large Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt Recording each patent assignment per	
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021	40	8021	l 40	property (times number of properties)	
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be	
1204 84 2204 42 ** Reissue independent claims					examined (37 CFR 1.129(b))	
over original patent	1801	750	2801		Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) \$126		fee (sp	• • •			
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic F	filing F	ee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY (Complete (if applicable) Registration No. Name (Print/Type) Kevin M. Farrell 35,505 Telephone 603-433-6300 (Attorney/Agent) (manued) Signature COLUSIT

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. P0031210.PDF

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PTO/SB/81 (10-00)
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number		
Filing Date		
First Named Inventor	Michael Lebner	
Group Art Unit		
Examiner Name		
Attorney Docket Number	0156-2004US01	

I hereby appoin			Place Customer
Practitione OR	ers at Customer Number		Number Bar Code Label here
✓ Practitioner	r(s) named below:		
	Name		Registration Number
Kevin M	A, Farrell	35,	,505
<u> </u>			
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Country	USA		
Telephone	(603) 433-6300	Fax	(603) 433-6372
am the:			
✓ Applicant/I	inventor.		
☐ Assigned	of record of the entire interest. See 37	CED 3 71	
	under 37 CFR 3.73(b) is enclosed. (Fe		B/9 <i>6</i>).
	SIGNATURE_efjApplicant.or	Assignee of	Record
Name	Michael Lebner		
Signature	/ Miky Mich		//
Date			7/24/03
	ne inventors or assignees of record of the entire mature is required, see below.	interest or their	representative(s) are required. Submit multiple

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